

NOV 30 2005
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NOV 30 2005
TRANSMITTAL FORM

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Number of Pages in This Submission

Application Number	10/727,877
Filing Date	December 3, 2003
First Named Inventor	Winkler, James L.
Art Unit	1,723
Examiner Name	David L. Sorkin
Attorney Docket Number	018547-035540US

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC			
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences			
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information			
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter			
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):			
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Return Postcard			
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund				
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____				
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD				
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53					
<table border="1"> <tr> <td>Remarks</td> <td colspan="2">The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.	
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	Mark C. Matthews		
Date	Nov. 28, 2005	Reg. No.	26,201

CERTIFICATE OF TRANSMISSION/MAILING

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Signature	
Typed or printed name	Connie Larson
Date	Nov. 28, 2005



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PATENT
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Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

On Nov. 28, 2005

TOWNSEND and TOWNSEND and CREW LLP

By: Connie Larson

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

James L. Winkler et al.

Application No.: 10/727,877

Filed: December 3, 2003

For: DEVICE AND METHODS FOR
MIXING FLUIDS

Customer No.: 33494

Confirmation No. 6741

Examiner: David L. Sorkin

Technology Center/Art Unit: 1723

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed August 26, 2005, please enter the following amendments and remarks:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 5 of this paper.